

DECLARATION and POWER OF ATTORNEY

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

PROCESS FOR RECOVERY OF CHLORINE FROM IRON CHLORIDES USING A TUBULAR REACTION

the specification of which is attached hereto unless the following box is checked:

☒ was filed on 12 December 2003 as U.S. Application No. _____ or PCT International Application No. PCT/US03/40327

and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is known to me to be material to patentability as defined in 37 CFR § 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or PCT International application having a filing date before that of the application on which priority is claimed.

Application No.

Country

Filing Date

Priority Claimed (Yes / No)

<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

I hereby claim the benefit under 35 U.S.C. § 119(e) of any United States Provisional Application(s) listed below.

U.S. Provisional Application No.

60/433686

U.S. Filing Date

16 December 2002

I hereby claim the benefit under 35 U.S.C. § 120 of any United States application(s), or § 365(c) of any PCT International Application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application or PCT International Application in the manner provided by the first paragraph of 35 U.S.C. § 112, I acknowledge the duty to disclose information which is known to me to be material to patentability as defined in 37 CFR § 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

Application No.

Filing Date

Status

---**POWER OF ATTORNEY:** I hereby appoint the following attorney(s) and/or agent(s) the power to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

Name: JESSICA M. SINNOTT

Registration No.: 34,015

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(302) 992-4773

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

INVENTOR(S)

Full Name of Inventor	Last Name <u>BULLER</u>	First Name <u>THOMAS</u>	Middle Name <u>J</u>
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☒ Additional Inventors are being named on separately numbered sheets attached hereto.

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2-00 Full Name of Inventor	Last Name <u>LYKE</u>	First Name <u>STEPHEN</u>	Middle Name <u>E.</u>	
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6-00 Full Name of Inventor	Last Name <u>DUNSON, JR.</u>	First Name <u>JAMES</u>	Middle Name <u>B.</u>	
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7-00 Full Name of Inventor	Last Name <u>TILTON</u>	First Name <u>JAMES</u>	Middle Name <u>N.</u>	
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DECLARATION AND POWER OF ATTORNEY - Page

Docket Number: CH2852 US PCT

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9-00 Full Name of Inventor	Last Name HALLOCK	First Name STEPHEN	Middle Name A.	
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Full Name of Inventor	Last Name	First Name	Middle Name	
	Signature (please sign full name):			Date:
Residence & Citizenship	City	State or Foreign Country	Country of Citizenship	
Post Office Address	Post Office Address	City	State or Country	Zip Code
Full Name of Inventor	Last Name	First Name	Middle Name	
	Signature (please sign full name):			Date:
Residence & Citizenship	City	State or Foreign Country	Country of Citizenship	
Post Office Address	Post Office Address	City	State or Country	Zip Code
Full Name of Inventor	Last Name	First Name	Middle Name	
	Signature (please sign full name):			Date:
Residence & Citizenship	City	State or Foreign Country	Country of Citizenship	
Post Office Address	Post Office Address	City	State or Country	Zip Code
Full Name of Inventor	Last Name	First Name	Middle Name	
	Signature (please sign full name):			Date:
Residence & Citizenship	City	State or Foreign Country	Country of Citizenship	
Post Office Address	Post Office Address	City	State or Country	Zip Code

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DECLARATION AND POWER OF ATTORNEY - Page

INVENTOR(S)				
Full Name of Inventor	Last Name LYKE	First Name STEPHEN	Middle Name E.	
	Signature (please sign full name):		Date:	
Residence & Citizenship	City WILMINGTON	State or Foreign Country DELAWARE	Country of Citizenship US	
Post Office Address	Post Office Address 3516 HOPKINS DRIVE	City WILMINGTON	State or Country DELAWARE	Zip Code 19808
Full Name of Inventor	Last Name BECKER	First Name AARON	Middle Name J.	
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Residence & Citizenship	City WILMINGTON	State or Foreign Country DELAWARE	Country of Citizenship US	
Post Office Address	Post Office Address 1218 EVERGREEN ROAD	City WILMINGTON	State or Country DELAWARE	Zip Code 19803
Full Name of Inventor	Last Name DE LA VEAUX	First Name STEPHAN	Middle Name C.	
	Signature (please sign full name):		Date:	
Residence & Citizenship	City WILMINGTON	State or Foreign Country DELAWARE	Country of Citizenship GERMANY	
Post Office Address	Post Office Address 102 BLUE ROCK ROAD	City WILMINGTON	State or Country DELAWARE	Zip Code 19809
Full Name of Inventor	Last Name DIEMER	First Name RUSSELL	Middle Name BERTRUM	
	Signature (please sign full name):		Date:	
Residence & Citizenship	City WILMINGTON	State or Foreign Country DELAWARE	Country of Citizenship US	
Post Office Address	Post Office Address 6 MATSON COURT	City WILMINGTON	State or Country DELAWARE	Zip Code 19803
Full Name of Inventor	Last Name DUNSON, JR.	First Name JAMES	Middle Name B.	
	Signature (please sign full name):		Date:	
Residence & Citizenship	City NEWARK	State or Foreign Country DELAWARE	Country of Citizenship US	
Post Office Address	Post Office Address 202 WINSLOW ROAD	City NEWARK	State or Country DELAWARE	Zip Code 19711-45
Full Name of Inventor	Last Name TILTON	First Name JAMES	Middle Name N.	
	Signature (please sign full name):		Date:	
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INVENTOR(S)				
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	Signature (please sign full name):		Date:	
Residence & Citizenship	City WILMINGTON	State or Foreign Country DELAWARE	Country of Citizenship US	
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Post Office Address	Post Office Address 1218 EVERGREEN ROAD	City WILMINGTON	State or Country DELAWARE	Zip Code 19803
Full Name of Inventor	Last Name DE LA VEAUX	First Name STEPHAN	Middle Name C.	
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Residence & Citizenship	City WILMINGTON	State or Foreign Country DELAWARE	Country of Citizenship GERMANY	
Post Office Address	Post Office Address 102 BLUE ROCK ROAD	City WILMINGTON	State or Country DELAWARE	Zip Code 19809
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	Signature (please sign full name):		Date:	
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Post Office Address	Post Office Address 102 BLUE ROCK ROAD	City WILMINGTON	State or Country DELAWARE	Zip Code 19809
Full Name of Inventor	Last Name DIEMER	First Name RUSSELL	Middle Name BERTRUM	
	Signature (please sign full name): <i>Russell Bertrum Diemer</i>		Date: <i>12/1/2005</i>	
Residence & Citizenship	City WILMINGTON	State or Foreign Country DELAWARE	Country of Citizenship US	
Post Office Address	Post Office Address 6 MATSON COURT	City WILMINGTON	State or Country DELAWARE	Zip Code 19803
Full Name of Inventor	Last Name DUNSON, JR.	First Name JAMES	Middle Name B.	
	Signature (please sign full name):		Date:	
Residence & Citizenship	City NEWARK	State or Foreign Country DELAWARE	Country of Citizenship US	
Post Office Address	Post Office Address 202 WINSLOW ROAD	City NEWARK	State or Country DELAWARE	Zip Code 19711-451
Full Name of Inventor	Last Name TILTON	First Name JAMES	Middle Name N.	
	Signature (please sign full name): <i>James N. Tilton</i>		Date: <i>12/1/2005</i>	
Residence & Citizenship	City LANDENBERG	State or Foreign Country PENNSYLVANIA	Country of Citizenship US	
Post Office Address	Post Office Address 8 BERKSHIRE ROAD	City LANDENBERG	State or Country PENNSYLVANIA	Zip Code 19350

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PROCESS FOR RECOVERY OF CHLORINE FROM IRON CHLORIDES USING A TUBULAR REACTION

the specification of which is attached hereto unless the following box is checked:

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Application No.

Country

Filing Date

Priority Claimed (Yes / No)

<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

I hereby claim the benefit under 35 U.S.C. § 119(e) of any United States Provisional Application(s) listed below.

U.S. Provisional Application No.

60/433686

U.S. Filing Date

16 December 2002

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Application No.

Filing Date

Status

POWER OF ATTORNEY: I hereby appoint the following attorney(s) and/or agent(s) the power to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

Name: JESSICA M. SINNOTT

Registration No.: 34,015

Send correspondence and direct telephone calls to:

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INVENTOR(S)

Full Name of Inventor	Last Name	First Name	Middle Name	
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☒ Additional Inventors are being named on separately numbered sheets attached hereto.

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INVENTOR(S)				
Full Name of Inventor	Last Name LYKE	First Name STEPHEN	Middle Name E.	
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Residence & Citizenship	City WILMINGTON	State or Foreign Country DELAWARE	Country of Citizenship US	
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Full Name of Inventor	Last Name BECKER	First Name AARON	Middle Name J.	
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Residence & Citizenship	City WILMINGTON	State or Foreign Country DELAWARE	Country of Citizenship US	
Post Office Address	Post Office Address 1218 EVERGREEN ROAD	City WILMINGTON	State or Country DELAWARE	Zip Code 19803
Full Name of Inventor	Last Name DE LA VEAUX	First Name STEPHAN	Middle Name C.	
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Full Name of Inventor	Last Name	First Name	Middle Name	
	Signature (please sign full name):		Date:	
Residence & Citizenship	City	State or Foreign Country	Country of Citizenship	
Post Office Address	Post Office Address	City	State or Country	Zip Code
Full Name of Inventor	Last Name	First Name	Middle Name	
	Signature (please sign full name):		Date:	
Residence & Citizenship	City	State or Foreign Country	Country of Citizenship	
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Full Name of Inventor	Last Name	First Name	Middle Name	
	Signature (please sign full name):		Date:	
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